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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FOR FY 2008

Application Number

O9/503,834

Filing Date
Febrauary 15, 2000

First Named Inventor
Francois PATENAUDE

Examiner Name
Bryan BUI

Art Unit
2863

Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	Bry	ran BUI	
, , , , , , , , , , , , , , , , , , ,			Art Unit	286	3		
TOTAL AMOUNT OF PAY	MENT (\$)	1440		Attorney Docket	:No. PA	T 1952B-2	
METHOD OF PAYMENT	r (check all	that apply)					
Check Credit (Card $\square_{ m M}$	Ioney Order	Non	e Other (p	lease identif	y):	
Deposit Account Deposit Account Number: 501593 Deposit Account Name:							
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information and authorization FEE CALCULATION	on P10-2038.						
		MOITAMMAY	CEE6				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEE						ATION FEES	
Application Type	<u>Sr</u> Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	O	0	0	
2. EXCESS CLAIM FEE	S					Fee (\$)	Small Entity
<u>Fee Description</u> Each claim over 20 (i	ncluding Re	eissues)				50	<u>Fee (\$)</u> 25
Each independent cla			ies)			210	105
Multiple dependent cl		C				370	185
Total Claims	Extra Claims Fee (\$) Fee Paid (\$)				Multiple De	oendent Claims	
20 or HP = x = <u>Fee (\$)</u>						<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of total Indep. Claims	Extra Claim	_	Fee	Paid (\$)			
3 or HP =		_ x					
HP = highest number of indep		paid for, if greater th	ıan 3.				
3. APPLICATION SIZE I		xceed 100 sheet	ts of par	er (excluding e	lectronica	lly filed sequen	ce or computer
listings under 37 CI						nall entity) for e	each additional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)
Other (e.g., late filing surcharge): Issue Fee						\$1440	

SUBMITTED BY						
Signature	/Anne Kinsman/	Registration No. (Attorney/Agent) 45,291	Telephone (613) 237-5160			
Name (Print/Type)	Anne Kinsman		Date November 13, 2007			

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